The Urban District Council of Goole.

ANNUAL REPORT

ON THE

Health of Goole

For the Year 1911,

BY

A. M. ERSKINE, M.D.,

B.Ch., D.P.H.,

MEDICAL OFFICER OF HEALTH.

Goole:

Elvin & Johnstone, Ltd., Printers, Boothferry Road.

1912.

Names of the Councillors,

1911-1912.

Mr. Councillor W. Jackson (Chairman).
" W. E. Grayburn (Vice-Chairman).

NORTH WARD

Mr. Councillor J. B. Timm.
" G. C. Short.
" L. Holmes.

SOUTH WARD.

Mr. Councillor J. Chalmers.
" R. G. Bickerton.
" G. E. Hill.

EAST WARD.

Mr. Councillor R. H. Huntington.
" R. Earnshaw.
" F. Chambers.

WEST WARD.

Mr. Councillor W. Jackson.
" T. Firth.
" W. H. Storr.

CENTRAL WARD.

Mr. Councillor W. E. Grayburn.
" F. B. Glew.
" S. G. Bevan.

OFFICIALS OF THE HEALTH DEPARTMENT:

A. M. Erskine, M.D. - - Medical Officer of Health.
W. H. Ellis - - - - - Sanitary Inspector.

— SUMMARY —

OF

VITAL & MORTAL STATISTICS.

Area	1,267 acres	
Population	20,334	
Marriages	172	rate 16
Births	631	rate 31·0
Deaths	351	rate 17·2
Infantile Mortality	115	rate 182
Zymotic Death-rate		4·1
Phthisis Death-rate		·9 ·6
Number of Notifications		141
Rateable Value	£74,831 8s. 2d	
District Rate	3/4	
Poor Rate	3/2	

Vital Statistics for the Year 1911.

1911.	ENGLAND AND WALES	Great Towns. (77.)	Smaller Towns. (136.)	England and Wales *less* the 213 Towns.
BIRTH-RATE ...	**24·4**	**25·6**	**23·4**	**23·4**
DEATH-RATE ...	**14·6**	**15·5**	**13·8**	**13·9**
Zymotic Death-rate...	1·88	2·29	1·98	1·40
Infantile Mortality ... (per 1,000 births)	130	140	133	118

To the Chairman and Members of the Goole Urban District Council.

GENTLEMEN,

I have the honour to submit for your information and consideration my Report on the Public Health and Sanitary Condition of the Urban District of Goole for the year 1911.

It is exactly ten years since I was appointed Medical Officer of Health, and coinciding as it does with the official census figures, I am enabled to make the statistical returns accurate, and pass in review the work of the last ten years.

According to the census return the population has increased from 16,576 in 1901 to 20,334 in 1911.

The birth-rate for the year is 31 compared with 33·6 in 1902, so that in spite of the fact that the population of the town is composed largely of young people our birth-rate is a declining one in agreement with that of the country generally.

The death-rate for the year is 17·2 compared with 18·8 in 1902. Had it not been for the epidemic of summer diarrhœa during the hot summer of last year, our death-rate would have continued a steadily decreasing one. Taking the previous three years for illustration. In 1908 it was 16·3, in 1909 it was 13, in 1910 it was 14·5, and for the first six months of 1911 it was only 13·9.

The death-rate of children under 1 year of age is 182, and it is here that the cause of our increased death-rate for the year 1911 is found. In 1902 this figure was 188, whereas in 1909 the figure was only 93. I commend to your earnest consideration my remarks on this subject embodied in the text of the report.

The zymotic death-rate is 4·1 compared with 2·6 in 1902 and contrasted with ·9 in 1909.

The death-rate from consumption is ·6; the deaths from tuberculosis have decreased by fifty per cent in the past ten years.

For the past ten years diphtheria has been prevalent in the town. Last year it gave us comparatively little trouble, and I am of the opinion that this improvement will continue.

I am,

Gentlemen,

Your obedient servant,

A. M. ERSKINE.

Presented 7th February, 1912.

Report on the Health of Goole during the Year 1911.

Natural and Social Condition of the District.

The town of Goole is situated at the extreme eastern part of the West Riding of Yorkshire, in the northern part of the flat alluvial plain of the Vale of York. It is placed on the western bank of the river Ouse, and lies at a lower level than the waters of the ordinary tides. These are prevented from overflowing by artificially raised banks. The general level of the town is ten feet above sea level. The stratum lying immediately underneath the natural soil is a layer of peat resting upon a thick bed of stiff clay.

Being a seaport town the chief occupation of the inhabitants is directly or indirectly associated with shipping. There are three shipbuilding and repairing yards, and two chemical works; in addition, to which Goole is the centre of an important agricul: tural district. None of these occupations exert any prejudicial influence on thepublic health.

The cost of Poor Law Relief for the year ending 30th September, 1911, for the Urban and Rural Districts of Goole which constitute the Goole Union area, was

In Maintenance	£2,623
Out Relief	£1,833
	£4,456

In addition to the Hospital for Infectious diseases there is a Cottage Hospital for cases of accident and general surgical treatment, and a General Infirmary for cases under the poor-law administration.

According to the preliminary census return for 1911, the following particulars are available :—

Area—1,267 acres; Families or separate occupiers—4,428; Population—20,334; being an increase of 3,758 in excess of the 1901 census enumeration and giving an average of 4·59 persons per house compared with 4·68 in 1901.

This would indicate that the conditions of over-crowding existing a few years ago were abated, and that the housing conditions of the people had returned to their normal state, and had even improved. During the year under review comparatively few cases of over-crowding came under our notice.

Sanitary Circumstances of the District.

Water Supply.

In spite of the long continued drought during the summer there was no curtailment of the water supply to the town, which continues to be sufficient in quantity and of excellent quality, as the following recent analysis shews :—

Total Solids	16·20
Chlorine (combined)	1·0
Nitrites	None.
Nitrogen as Nitrates	·630
Free Ammonia	·0007
Albuminoid Ammonia	·0018
Lead	None.
Total hardness	8·0

In grains per gallon.

The consumption of water is on the average about 519,000 gallons per day, being at the rate of 25½ gallons per head of population per day. At all times has the supply been constant. Its source is from the New Red Sandstone, and no possibilities of contamination exist, nor has it any plumbo-solvent action.

Rivers and Streams.

So far as pollution is concerned, this matter is under the surveillance of the West Riding Rivers Board.

Dr. Adeney, in his evidence before the Local Government Board enquiry in regard to the New Sewerage Scheme, stated :—

"The results yeilded by the (above) samples reveal the fact that the waters of the Ouse, which they represent, contained no polluting matters of any kind in appreciable quantities, either in solution or suspension ; and they shew that these samples were collected at a time when the purification of the constituent waters of the Ouse, under natural conditions, from previous contamination with sewerage and other waste matters was passing through its final stage, viz. :— the nitrification of the last traces of ammonia. From the (above) examination of the organic matters, which occur with the suspended matters, it is evident that they have undergone complete purification. It need scarcely be pointed out that the composition of the suspended matters is illustrative of the composition of the clay and sand covering the bed of the river."

So far as the public health is concerned I am unaware of their being any prejudicial influence exerted upon the health of the inhabitants from this source.

Drainage and Sewerage.

It was not until the 1st of August that an enquiry was held in regard to the application of the Council to borrow money for Sewerage purposes, and on the 7th November, a letter was received from the Local Government Board approving of the scheme, which stated "that the use of manhole covers should be avoided near houses, and that ventilating columns should be provided."

It is expected that an actual start will be made almost immediately.

The scheme will provide for the efficient sewerage of the town for a considerable number of years, and is capable of extension at any time. How urgent the matter is has been shown during the past summer during which we experienced a serious outbreak of summer diarrhœa followed by one of enteric fever, both infectious and more or less preventible diseases, and in a large measure due to our system of faecal accumulation close to dwellings, by means of our method of box closets.

The scheme is based on the gravitation system. Two main trunk sewers will pass through the town, and coming together will travel to the pumping station, which is to be situated at West Field, in the parish of Hook, close to the Sanatorium. One advantage to be gained from this site is that the sewerage system of the hospital can be very readily joined on to the main trunk sewer. At the outlet the sewage will be pumped up and screened, and at all state of the tide, discharged into the river. The main sewers, as well as the subsidiary sewers, will run in straight lines, and they will be altogether apart from the existing sewers, which are to be used solely for the carrying off of surface water.

Closet Accommodation.

Goole is essentially a box closet town as the following figures show :—

Water Closets		...	...	753
Box Closets	...	...	..	4013
Privies	...	...	...	165

And for this condition of affairs we have paid the penalty during the past summer. Dr. Kaye says ; "The type of closet generally in use in a district may be taken to indicate roughly the stage reached in sanitary civilisation." Unfortunately we have not reached a very advanced stage, and as a result I have to record 45 deaths as due to summer diarrhœa and 10 to enteric fever. Nevertheless this is not such a bad record as in previous years, when the climatic conditions were similar.

The first main step in advance is a pure water supply. This we have had for some time.

It has been recognized for a considerable period that a new Sewerage Scheme was needed for the town, and I am now in the position of being able to record that all the preliminaries have been settled and

the provision of a complete Sewerage Scheme is only the period of time necessary to construct it. When this has been effected the next stage will be the conversion of the box closets of the town into water closets.

Ever since I was appointed this has been the policy I have advocated, and when alterations were required we have asked that water closets be substituted. It has not always been possible to do so owing to the limitation of our existing drainage, but when this has been remedied I hope to see the gradual abolition of the objectionable box closets, and the substitution in their place of water closets.

In Old Goole district where the sewerage is sufficient, this substitution might take place in a much more expeditious manner, especially in the case of the erection of new houses. This can be done under Secs. 39 to 42 of the Public Health Acts Amendment Acts 1907.

Scavenging.

House refuse is removed weekly by contractors and is efficiently carried out.

The night soil scavenging is performed by the same contractors in the Council's carts. The present carts are unsatisfactory and the contents overflow on the roads. This at all times is objectable, but has been especially so during the past summer, and complaints to this effect were received almost daily. Also numerous and forcible complaints were made of the offensive smell emanating from the night soil tip and from open man-holes in different parts of the town. In fact during the hot weather scarcely a day passed that we did not receive complaints of offensive smells, and our own observations only served to emphasize the truthfulness of these complaints.

I am glad to observe that the Local Government Board in their letter giving sanction to the loan for sewerage purpose make it a condition " that the use of manhole covers should be avoided near houses, and that ventilating columns should be provided."

On removal of the contents of the soil boxes, &c., these are sprinkled freely with carbolised peat dust which is absorbent and deodorizing.

All night soil and refuse has been buried and covered over with earth at the tipping place, which is a distinct improvement upon the old method of simply tipping it on a heap on the ground. 9,289 loads of nightsoil and 1,520 loads of refuse have been buried in this manner during the year.

The Inspector reports that the scavenging of the town has been carried out satisfactorily by the contractors during the year under review.

Sanitary Inspection of the District.

The total number of inspections made during the year was 2342.

244 Informal Notices were served and 232 of the these complied with.

15 Statutory Notices were served and 12 of these remedied.

The Inspector of Nuisances reports as follows :—

No. of	Inspections made (exclusive of Workshops) ...	2342
,,	Preliminary Notices served	244
,,	Verbal Notices given	17
,,	Statutory Notices by order of the Council ...	27
,,	Summons issued...	1
,,	Nuisances not abated at close of year	9
,,	House Drains repaired and defects remedied ...	30
,,	New Inspections Chambers provided to old drains ...	32
,,	Back Yards repaved and repaired	9
,,	Kitchen Floors repaved and repaired	6
,,	Removal of Rabbits, Fowls, etc.	8
,,	Removal of Pigs	2
,,	Dirty Houses and out-premises cleansed etc. ...	1
,,	Hen-coops. Rabbit Hutches, &c., removed ...	0
,,	Stables re lime-washed	0
,,	Defective and choked W.C.'s	3
,,	Defective W.C. Soil Pipes and Ventilators ...	8
,,	Defective Sink Pipes, new ones provided ...	6
,,	New Trapped Gullies provided in place of broken ones	5
,,	Houses overcrowded	7
,,	Houses Disinfected and Cleansed after Infection ...	102
,,	Manure and other refuse removed	3
,,	Miscellaneous Nuisances dealt with	64
,,	Privey Middens converted into soil-pails... ...	41
,,	Soil-pails provided in place of Privy Middens ...	79
,,	W.C.'s provided in place of Privy Middens ...	27
,,	Defective and Broken Soil Boxes replaced ...	136
,,	Offensive Trades...	7
,,	Defective Construction of Closets Seats (altered) ...	24
,,	Samples of Well Water taken for Analysis ...	2
,,	Soil Boxes and Dry Dust Bins emptied weekly ...	3886
,,	Ash-pits emptied once a month	220
,,	Loads of Nightsoil removed during the year ...	9289
,,	Loads of Lumbersome Refuse removed during the year (Monday and Fridays Collection) ...	1520
,,	New Dust Bins provided in place of defective ones ...	2
,,	Defective Soil Box Holes repaved with concrete ...	2

Lodging Houses.

There are four common lodging houses in the district, whose condition may be described as fairly satisfactory and well conducted.

Offensive Trades.

Only two offensive trades exist in the Urban area, that of tripe boiler and tillage works, and these have given no cause for complaint.

Schools.

The public elementary schools of the town have a separate school medical officer, appointed by the West Riding County Council.

Their sanitary conditions, including water supply, is efficient

Owing to an outbreak of measles at the end of February all the children of the town under five years of age were excluded from school attendance till after the Easter holidays.

In September we received early intimation of cases of measles at the Infants' Department of the Old Goole Provided Schools. and these were closed for a period of seven days. This action did not prove successful and all the Old Goole Infant Schools were closed for a further period, *i.e.*, from November 13th to December 4th.

Whooping cough also was prevalent amongst school children during the greater part of the year.

For the first year since my appointment 10 years ago, diphtheria has not ben specially prevalent amongst school children.

Food.

(*a*) **Milk Supply.**—There are only two cow-keepers in the district, the larger proportion of the milk supply of the town being obtained from the farmers in the immediate neighbourhood. None of the five samples taken during the year showed evidence of adulteration below the legal standard, and altogether I have reason to believe that greater care is exercised by the milk sellers in regard to cleanliness, &c.

No action taken in regard to tuberculosis milk, and no prosecution under the Dairies, Cowsheds, and Milkshops orders.

(*b*) **Other Foods.**—Under this heading the inspector reports that his attention has not been called to any cases of unsound food.

The bakehouses have been regularly inspected, and their condition found clean and sanitary. One bakehouse has been closed owing to its being underground and not in accordance with the law.

Periodical inspection is made of the various butchers' shops and regular inspection at the two slaughterhouses—one of which is a private one. Although negotiations are still taking place there is no record of progress to make in the matter of the erection of a new public abattoir, which is urgently required.

Three carcases of beasts have been examined for tuberculosis One carcase was seized and condemned by a magistrate. The carcase and offals were destroyed by burning.

The disease in the other two was very slight; the offals were destroyed and the carcases passed.

All food stuffs and other produce brought to the Market have been of good quality and no complaints or seizures have been necessary.

With regard to Shops it is occasionally necessary to draw the owners' attention to damaged fruit, sweets, etc., which is exposed in the windows. Beyond this nothing has happened to call for special attention.

There has been no action taken under Section 117 of the Public Health Act, 1875.

Canal Boats Acts, 1877—84.

Number of Boats inspected	126
Highest Number on Register	879
Number of Boats believed to be in use or available	676
Number of Boats that cannot be traced (probably)	200
Number of Boats complying with the Acts during the year	119
Number of Boats Contravening the Acts during the year	7
Number of Contraventions on the Boats ...	12
Number of Transferences of Ownership ...	2
Number of Duplicate Certificates issued ...	9
Number of Owners neglecting to properly mark and number their Boats	2
Number of Changes of Boats Names... ...	1
Number of cases of Overcrowding	0
Number of cases of Young Girls over 12 years of age occupying Cabins	0
Number of Boat's Cabins requiring Re-painting ...	5
Number of Dirty Cabins requiring more attention	3
Number of Boats requiring Water Casks ...	0
Notification of Infectious Diseases	0
Number of Boats requiring re-registration because of structural alterations	0
Number of Boats registered	3
Number of Boats cancelled off the register ...	3

The Boat's cabins which have been inspected were registered as sleeping places and to accommodate the following number of persons:—Aft cabins 345 adults and 119 children; Fore cabins 248 adults and 24 children; whilst the actual number occupying were 163 men, 84 women and 53 children.

No infectious disease has been notified during the year.

Housing of the Working Classes.

During the year under review little or no difficulty has been experienced in obtaining houses for the working classes.

Seven cases of overcrowding have been dealt with during the year.

In the erection of new houses, which are under the supervision of the Surveyor, ample provision is secured for sufficiency of open spaces about houses, and a more active campaign has been undertaken in the abolition of wooden and other erections in back yards.

Only one back street, *i.e.* Duckels Buildings, has been paved during the year.

The condition of our back streets which are not made up is deplorable. One is led to wonder if the time will ever come when Goole may be considered a clean town!

Under the Act of 1809, 197 houses were inspected.

Housing and Town Planning Act, 1909.

The following are the main provisions of this Act:—

(1.) Power is given to the Local Sanitary Authority to make Closing Orders upon unhealthy dwellings without application to the Magistrates.

(2.) Power is given to the Local Sanitary Authority to order the demolition of an unimproved dwelling-house, where a Closing Order has been in operation for three months.

(3.) Definite power of entry.

(4.) Prohibition of building back-to-back houses.

The following is a summary of the Local Government Board Regulations made under Section 17 (1).

Housing (Inspection of District) Regulations, 1910.

(1.) The Local Authority shall as part of their procedure make provision for a thorough inspecion to be carried out from time to time, according to the varying needs or circumstances of the dwelling-houses or localities in the district of the Local Authority.

(2.) The Medical Officer of Health or Housing Inspector must maintain list of houses requiring inspection, such inspections to deal with lighting, ventilation, dampness, cleanliness, drainage, closet accommodation, water supply, conditions of yards and outbuildings, refuse disposal, &c.

(3.) Full records of such inspections, and of the details of subsequent action, must be systematically maintained, and the records must be periodically acted upon as required.

(4.) The Medical Officer of Health, in his Annual Report, must state fully and in tabulated form the work done under Section 17 of the Act.

Under Section 17, forty houses were reported to be in a state so dangerous or injurious to health as to be unfit for human habitation. Representations were made to the Committee to this effect and closing orders made.

Sixty-two dwelling houses had their defects remedied without the making of closing orders. Thirty-one houses, after the making of closing orders, were put into a fit state for human habitation; 9 were completely demolished.

The principal defects found were want of efficient drainage, dampness of walls caused by soil heaped up, insufficient air space, want of sufficient closet accommodation, double pits close to houses, damaged kitchen and bedroom floors, damp ceilings and walls, windows not made to open and giving insufficient light.

Eight back-to-back houses have been converted into four through houses and undergone extensive repairs. Six cellars which were used as sleeping places have been closed; 73 windows which were "fast" have been made to open; 17 new windows have been provided in place of old ones; 8 back yards have been repaired and 8 more covered with concrete; 19 kitchen floors have been re-laid; 17 house roofs re-spouted; and 31 roof spouts repaired, new drains re-laid where necessary.

Number of Insanitary Ash-pits abolished and Galvanized Iron Soil-boxes or W.C's substituted.

	No. of Ashpits Demolished.	Double Pits.	Single Pits.	No. of Closets attached to Pits.	No. of Boxes provided.	No. of W.C's. provided.
Moorland Road	3	0	3	4	4	0
Vermuyden Terrace ...	1	0	1	1	1	0
Pasture Road	2	0	2	2	2	0
Swinefleet Road	7	2	5	9	8	1
Heber Terrace	3	1	2	4	4	0
Couper Street	12	3	9	21	25	0
Third Avenue	7	3	4	10	10	0
Notch Cape	3	0	3	3	3	0
Sotheron Street	6	6	0	12	2	10
Sutton Street	6	6	0	12	0	13
Argyle Street	3	1	2	4	2	2
Mariners Street	1	1	0	2	2	0
Carter Street	1	1	0	2	1	1
Fleeman's Buildings ...	12	0	12	12	12	0
Hirst's Yard	2	2	0	4	4	0
	69	26	43	102	80	27

Tabulated Statement of Action Taken during the Year, 1911, Under the Housing Town Planning, &c., Act, 1909.

Situation of Houses.	Number of Houses.	Chief Defects.	Chief Works of Improvements carried out.
Clough Cottages, Swinefleet road	1	Badly paved yard. Damp rooms. Defective spoutings. Insufficient drainage	Preliminary notice served and improvement effected
Smith's Cottages, Swinefleet road	2	Rooms damp. Defective yard paving Broken kitchen floors. and insanitary ash-pits.	Improved as per Preliminary notice
Clark's Cottages, Swinefleet road	3	Damp rooms. Spoutings defective. Mortar joints in house walls defective. Paving round cottages in bad condition.	Improved per Preliminary notice.

Nos. 77 to 85, Swinefleet road	5	Chiefly insanitary ash-pits.	Improved as per Preliminary notice
No. 38, Swinefleet road	1	Kitchen damp. Fixed top sash in windows Insufficient ventilation Yard paving defective.	Improved per Notice under Section 17 of 1909 Act
Nos. 42 to 48, Swinefleet road	4	Defective kitchen floors, roofs and and spoutings. Insufficicent drainage. Yard paving defective. Bedroom floors defective and stairs in bad condition.	Improved per Notice under Section 17 of 1909 Act
Heber Terrace Cottages	5	Chiefly insanitary and offensive ashpits.	Improved per Preliminary notice
Nos. 6, 8 and 10, Dutch River side	3	House walls damp. Floors defective.	Action deferred pending consideration of demolition.
Nos. 4, 5 and 1 to 7, Dutch River side	8	Defective roof and downfall spoutings. Fixed sash windows. Insufficient ventilation. Kitchen paving defective.	Improved per notice under Section 17 of 1909 Act
Nos. 6, 8 and 10, Capstan street	3	Insufficient ventilation. Fast sash windows. Insufficient sanitary accommodation. Rooms exceedingly damp.	Condemned as irreparable and been demolished.
Nos. 9, 11 and 13 and 3 others	6	Houses in dilapidated condition. Insufficient ventilation. Dark and unhealthy. Back to back houses.	Notice served under Section 17 of the Act. Improvements carried out and houses converted into through ones.
No. 18, Foundry lane	1	Defective window sashes and roof spouting. Insanitary closet.	Preliminary notice served.
No. 20, Foundry lane	1	Light and ventilation insufficient. Broken kitchen floor and walls.	Improved per Preliminary notice
No. 1 to 5. Foundry lane	5	Insanitary and insufficient closet accommodation. Yard paving defective. Dark and badly ventilated rooms. Kitchen floor paving defective.	Notice served under Section 17 of the Act.
Nos. 1, 3, 5, 7 and 4 4 houses at rear Capstan street	8	Leaky roofs. Damp rooms. Insufficient ventilation. Spoutings defective. Back to back.	Closing order issued under Section 17 of 1909 Act
Nos. 6, 8 and 10, Capstan street	3	Houses quite unfit for human habitation. Exceedingly damp.	Closing order per Section 17 of 1909 Act. Houses demolished.
Nos. 9, 11, 13 and 3 houses at rear Capstan street	6	Walls and ceilings defective and leaky. Kitchen floors defective. Insufficient closet accommodation Back to back houses.	Preliminary notice served and improvements effected.
Nos. 1 to 5, Elvin's Yard, Doyle street	5	Kitchen floor paving defective. Dampness. Insufficient ventilation.	Closing Order issued under Section 17 of 1909, Act Nothing done
Nos. 3 to 9, Doyle street	4	Roofs leafy. Ceilings defective Closets too near houses.	Preliminary notice served and improvements effected.

No. 2, Gleadow's yard, rear 21, Doyle street	1	Insanitary cellar kitchen, habitually used as a sleeping place.	Closing Order issued under Section 17 Sub-section 7 of 1909 Act.
Nos. 1 and 2, Blacksmith's yard, Doyle street	2	Dampness, Spouting defective. Oven fixtures out of repair.	Improved per Preliminary notice.
Nos. 11 and 12 Dutch River side	2	Kitchen floors defective. Doors broken. Oven fixtures defective.	Preliminary notice served and improvements effected.
No. 29, Doyle street	1	Insanitary cellar kitchen, being habitually used as a sleeping place.	Preliminary notice served and improvements effected.
Nos. 77, 81, 83 and 2 houses at rear George street, Old Goole	5	Insufficient closet accommodation. Insufficient ventilation. Defective spoutings.	Improved per Preliminary notice.
Nos. 62,64, 66, 68 and 3 houses at rear George street, Old Goole	7	Kitchen floors defective. Roofs leaky. Spoutings defective. Windows defective.	Improved per Preliminary notice.
Nos.32, 34, 36, 40, 42, 44, 52, 54, 56, 58, and 10 houses at rear, Couper street, Old Goole	21	Very damp. Insufficient ventilation. Spoutings defective. Roofs leaky.	Improved per Preliminary notice.
Nos. 23 to 43, Swinefleet road	11	Insufficient ventilation. Kitchen floors defective. Spoutings defective. Floors broken and roofs leaky. Very damp.	
Nos. 22 to 38, Swinefleet road	9	Houses dilapidated. Insufficiently ventilated. Insufficient drainage. Fast window sashes	Improved per Preliminary notice.
Nos. 1 and 6, Oakes yard, Victoria street, off Bridge street	2	Insanitary cellar. Kitchens habitually used as sleeping places.	Closing Order issued under Section 17 Sub-Section 7 of 1909 Act.
Houses rear of 47 and 49 Albert street	2	Insanitary cellar. Kitchens habitually used as sleeping places.	Closing Order issued under Section 17 Sub-Section 7 of 1909, Act
Nos. 4 to 14, Mariners street	6	Very dilapidated and damp. Drainage insufficient.	Closed by order per Section 17 of 1909, Act.
Nos. 2, 4, and 6, St. George's terrace	3	Leaky roofs. Damp yard paving defective. Broken kitchen floors.	Preliminary notice served, repairs now in hand.
Nos. 23 to 39, Queen's avenue	9	Roofs leaky. Very damp. Defective construction of closets. Yard paving defective. Windows defective.	Preliminary notice served, repairs now in hand.
Nos 41 to 47, South street	4	Ceilings defective. Insufficient ventilation. Spoutings defective. Kitchen floors defective.	Improvementsnow in hand per Preliminary notice.

No. 4 to 12 and 1 house at rear Quay street	6	Insufficient ventilation. Roofs leaky. Kitchen floors defective. Spoutings defective.	Improvementsnow in hand per Preliminary notice.
Nos. 57 to 65, Couper street, 1 Cross street and 4 Houses in Couses yard	10	Roofs leaky Spoutings defective. Kitchen floors defective. Insufficiently ventilated. Very damp.	Improvementsnow in hand per Preliminary notice.
Nos. 2 to 6, Calder square	6	Very dilapidated and damp. Roofs leaky. Kitchen floors defective. Bannisters and rails broken,	Houses voluntary closed as unfit for human occupation

Such is our year's record under the Act, and our experience, like that of others, is, that this is not everything whatever politicians may tell us. The greatest thing in the world is, after all, good health, and you can only have this if you have a sound constitution. In every instance we found the landlord willing to agree to our requests to improve his property, but not always the tenants to improve their careless habits and dirty ways. Sickness and disease depend upon many things, bad dwellings included, but the personal habits of the people cannot be controlled by Local Authorities and yet if the body be allowed to be covered with dirt it will be prevented from performing its proper functions and so become a prey to disease; and so also with drunkenness, sensuality, viciousness, all of which undermine the constitution. Why, for example, have we to record 38 deaths from congenital debility and 4 from syphilis in infants, if these be not due to disease in the parents. The responsibility for healthy children depends more upon the parents than upon the State. It is necessary to draw attention to this aspect of the question in these days when the State is doing so much because these causes frustrate the efforts of those of us who are striving after a healthy community free from every form of preventible disease.

Open Space.

The Council have purchased an area of over three acres situate on the Hook Bank which will be dedicated to the public use after it has been laid out in the form of a pleasure ground.

Sanitary Administration of the District.

I.—In addition to the Medical Officer of Health, the staff of the public health department consists of the Inspector of Nuisances and a Probationer in the office.

Owing to the increased amount of work recently devolving upon the department more especially in connexion with the Housing Regulations, 1909, this staff is not sufficient. An experienced Clerk is required to do the clerical work alone so that the Inspector may be able to devote the whole of his time to the duties outside the office. Since my appointment the work of the department has more than doubled.

The experience of last summer again raises the importance and necessity of a female health visitor, and one could easily be obtained, for the summer months at least. Before the removal of the Sanatorium to Hook I was able to make call upon the services of the Nurses, when the hospital was situated in the town and under the authority of the Urban Council. Under the Joint Board of course I am unable to do so. Her duties would be :

(1) To visit the homes where a recent birth had taken place.

(2) To follow up the contacts in cases of Diphtheria and Scarlet Fever.

(3) To keep in touch with the various schools of the town and report the early cases of Measles, Mumps, &c., and also to see that treatment was obtained for cases of contagious skin diseases such as ringworm, impetigo, itch, &c.

(4) In the event of summer diarrhœa breaking out her time would be fully occupied in visitation of the homes where this disease was present, seeing that instructions were being carried out, offering advice as to treatment, and reporting upon the surrounding sanitary conditions with the view of remedying any of the causes which contribute to the disease.

(5) Adoption of the Notice of Births' Act, 1907, when she would have general duties with a view to the reduction of infantile mortality.

(6) Visitation of the homes of consumptives and discovering the earlier unrecognized cases, as by such methods the ultimate eradication of the disease will be effected.

II.—**Hospital Administration.**

There is a hospital of 26 beds for the treatment of infectious diseases situated at Westfield Banks in the parish of Hook. It is under the administration of the Goole Urban and Rural Authorities, and patients are received from both areas.

Up to the present no action has been taken in regard to the hospital treatment of patients suffering from consumption.

III.—A list of the Acts in force in the district will be found in Table C.

IV.—**Chemical and Bacteriological Work.**

Under Water Supply will be found a Copy of Analysis of the water supply for the town.

Other samples were taken from the few remaining wells in the town and in no instance were they reported upon as contaminated.

The West Riding County Council afford complete facilities for the Bacteriological examination required in cases of Diphtheria, Enteric Fever, Pulmonary Tuberculosis, Ringworm, &c., and this has been fully utilized not only at the Sanatorium, but also by all the doctors of the town.

Vital Statistics of the District.

Population.

According to the figures obtained from the preliminary census return for the year 1911, **the population of the town was returned as 20,334, being an increase of 3,758 persons or 23·2 per cent compared with the 1901 census,** and I have the different birth and death rates with this figure, determining the rate of annual increase between the figures for 1901 and 1911 by the aid of logarithms, assuming of course that the rate of increase has gone on at exactly the same rate. A reference to Table I. shows these various figures.

Up to the time of writing the only details available from the census return are :—

Area—1,267 acres. Population—20,334. Families or separate occupiers—4,428. Giving an average number of persons per house of 4·59.

It is exactly ten years since I was appointed Medical Officer of Health and this year I am enabled to make the statistical returns accurate, with the aid of the recent Census return, and review the figures for the past ten years.

The Official Census figures shew that we had considerably underestimated the population of the town and consequently present our death rates in a more favourable light.

The natural increase of population for the year, i.e., the excess of births over deaths was 280 in 1911

This figure compares with 340 in 1910
413 in 1909
361 in 1908
325 in 1907
360 in 1906
273 in 1905
170 in 1904
294 in 1903
244 in 1902

A glance at these figures singles out at once the year 1904 as presenting an abnormally low rate of increase, and this becomes further emphasized as we reach the other statistics for that year. Looking back we find that during the year 1904 the summer was exceptionally fine and dry with its tale of infantile deaths, mainly from infectious diarrhœa and measles. This also is the record for the year under review with the exception that the deaths from measles were not so excessive. In reviewing the year 1911 the comparison therefore should be made more particularly with the year 1904 to find out if our Sanitary Administration is doing its duty to stem such a deplorable waste of life, or if we are simply dependent upon climatic conditions. It is at once apparent, even to the casual observer, that if the conditions such as existed in 1904 and 1911 continued in other years, our population, instead of increasing, would

become decimated, and our very existence as a town threatened, and indirectly also that of the nation. In other words it would be merely a survival of the fittest. Speakers and writers on this subject instance the case of the Spartans, but they omit the fact that the Spartans as a nation were virtually wiped out in three generations.

Unfortunately, with the two diseases mainly concerned in this devastation, we have only limited powers, neither of them being notifiable disease. Contrast this with the record under the notifiable diseases.

Area.

According to the Official Return the area of the town has increased from 1,218 acres in 1910 to 1,267 in 1911.

65 new houses were built in 1911, mainly of the villa type.

Births.

The total number of births registered during the year was 631, giving a birth rate of 31 per 1000 of the population.

During the preceeding year there were 630 births, with a birth rate of 31·6 per 1000.

Of the births 313 were males and 318 females.

Arranged according to Wards 202 were registered in the North Ward, 156 in the South Ward, 136 in the East Ward, 59 in the West Ward, and 78 in the Central Ward, showing an increased number in the North and Central Wards, a decreased number in the East and South, the West remaining stationary.

There were 40 illegitimate births compared with 29 in 1910, 26 in 1909, 33 in 1908, 34 in 1907, and 27 in 1906.

39 still-born children were buried in the cemetery compared with 35 in 1910, 30 in 1909, 19 in 1908, 37 in 1907, and 37 in 1906.

The average birth rate for England and Wales in 1911 was 23·4 for 136 small towns.

Marriages.

The number of Marriages celebrated in the Urban District during the year was 172, being an annual rate of 16 persons married per 1000 of the population.

In 1910 the marriage rate was 16.
,, 1909 ,, ,, 18.

Deaths.

The gross total number of deaths registered during the year was 345, giving a death rate of 16·9 per 1000 of the population. If the deaths of 13 non-residents registered in the district be deducted and that of 20 residents not registered in the district, but stated to belong to the town be added, **the nett total number of deaths was 351, giving a nett death rate of 17·2 per 1000 of the population.**

During the preceeding year the nett total number of deaths was 290 with a death-rate of 15·2 per 1000.

Of the deaths 191 were males and 160 females.

76 were registered in the North Ward.
105 ,, ,, South Ward.
88 ,, ,, East Ward.
36 ,, ,, West Ward.
46 ,, ,, Central Ward.

The death rate for England and Wales during 1911 was 13·8 for 136 small towns.

Since the year 1905 our death rate has been a decreasing one but this year I have to record an increase. Up to 1904 17·2 would have been considered an average death rate for Goole.

The death rate in 1904 was 21·6. The death rate in 1908 was 16·3.
,, ,, 1905 ,, 16·2. ,, ,, 1909 ,, 13·
,, ,, 1906 ,, 16·3. ,, ,, 1910 ,, 14·5
,, ,, 1907 ,, 15·2.

And now, unfortunately, we revert somewhat, and I have to record a rate of 17·2. The favourable aspect of this increased number, however, is that it compares with 21·6 which was the death rate for the year 1904, as it is with that year mainly that our comparison must be made, because the increased deaths in the two years are similar and due to like causes.

Taking the Ward totals for the past three years we have—

	1909.	1910.	1911.
North ...	54	73	76
South ...	49	74	105
East ...	76	68	88
West ...	29	36	36
Central ...	46	38	46

which shows a very large increase in the South Ward, followed by a moderate increase in the East Ward, and not such variation in the other three Wards.

Comparing the causes of deaths in 1911 with those in 1910, it will be observed that there was an increase in 1911 in the deaths from the following diseases :—

	Total deaths in 1911.	Total deaths in 1910.
Enteric Fever ...	10	0
Measles ...	9	3
Scarlet Fever ...	1	0
Whooping Cough	13	1
Diarrhœa ...	45	18
	78	22

Making a difference of 56 and practically accounting for the increase for the year under review.

In the case of Diphtheria the number of deaths in both years is the same, *i.e.*, 6.

In the case of Phthisis there is a decreased number, *i.e.*, 13 in 1911 and 20 in 1910, and other tubercular diseases 13 in 1911 and 14 in 1910.

All the foregoing diseases are more or less communicable and so preventible diseases, and "have intimate relationship with immediate sanitary administration." All of these will be referred to in detail in another part of this report.

Doubtless as further bearing on our increased death rate, we have received from the Registrar General, under the new system of registration, an increased number of deaths to be assigned to Goole. For almost the first time this number has been greater than the deductions, *i.e.*, 20 additions against 13 deductions. Several of these we were unable to trace at all, for example, a sailor from a ship owned in Goole but never had been to Goole and the crew were shipped in Liverpool; a French sailor removed from a French boat; the child of parents visiting at Goole when their baby was born, and died here, &c.

Extending the table further there were in

	1911.	1910.
Deaths from Cancer ...	19	21
,, Bronchitis ...	18	23
,, Pneumonia ...	28	29
,, under 1 year...	155	73

A striking illustration is afforded by comparison of the death rate for the first half of the year with the rate for the whole year. For the period January to June the death rate was only 13·9.

Deaths under Five Years of Age.

The total number of deaths under the age of five years was 163, or nearly half the total number of deaths. This figure compares with

148	during the year	1902.	105 during the year 1907.
114	,, ,,	1903.	159 ,, ,, 1908.
190	,, ,,	1904.	90 ,, ,, 1909.
117	,, ,,	1905.	106 ,, ,, 1910.
107	,, ,,	1906.	

Here again we see the same fact illustrated. The years 1904, 1908,and 1911 stand out in a very prominent position and the cause for the increased death rate is the same, *i.e.*, measles, whooping cough, and diarrhœa. In 1908 the cause was measles and whooping cough, and in the other two years it was summer diarrhœa, evidently the penalty we pay for having what to adults is a glorious summer, but which to the little ones is the direst penalty of all—that of death.

What stronger case can be presented for increased staff, cleaner streets and surroundings, and abolition of our antiquated box closet system, with all its attendant evils?

Inquests.

19 inquests were held during the year.

Of these deaths 3 were accidents, 3 were suicides, 3 due to drowning, 1 alcoholism, 7 due to natural causes, and 2 to scalds.

TABLE 1.

VITAL STATISTICS DURING 1911 AND PREVIOUS YEARS IN THE URBAN DISTRICT OF GOOLE.

Year.	Population estimated to Middle of each year.	Births.			Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Uncorrected Number.	Nett.						Deaths under One Year of Age		At all Ages.	
			Number.	Rate.	Number.	Rate.	Of Non-residents registered in the District.	Of Residents not regitered in the the District.	Number.	Rate per 1000 Nett Births.	Number.	Rate.
1906	18359	660	660	35·9	308	16·7	12	4	98	148	300	16·3
1907	18738	610	610	32·5	282	15·0	9	12	78	127	285	15·2
1908	19125	678	678	35·4	320	16·7	17	9	102	151	312	16·3
1909	19520	667	667	34·1	261	13·3	16	9	62	93	254	13
1910	19923	630	630	31·6	290	14·5	14	14	73	115	290	14·5
1911	20334	631	631	31·0	345	16·9	13	20	115	182	351	17·2

Area of District in acres (exclusive of area covered by water) .. 1267 **Acres.**

Total population at all ages	20,334	At Census of 1911.
Number of inhabited houses	4,428	
Average number of persons per house ..	4·59	

TABLE III.

CAUSES OF, AND AGES AT, DEATH DURING YEAR 1911, IN THE URBAN DISTRICT OF GOOLE.

Causes of Death.	DEATHS IN WHOLE DISTRICT AT SUBJOINED AGES									Total Deaths in the District.
	All Ages.	Under 1.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	
Enteric Fever	10	..	..	..	1	5	3	..	1	...
Small-pox	..	..	..	..	..	..	..	..	..	..
Measles	9	1	3	4	1	..	..	..	..	..
Scarlet Fever	1	..	..	..	1	..	..	..	..	..
Whooping Cough	13	6	6	1	..	..	..	..	..	..
Diphtheria and Membranous Croup	6	..	..	3	3	..	..	..	..	..
Croup	..	..	..	..	..	..	..	..	..	..
Diarrhœa	..	..	..	..	..	..	..	..	..	..
Enteritis	..	..	..	..	..	..	..	..	..	..
Erysipelas	..	..	..	..	..	..	..	..	..	..
Phthisis (Pulmonary Tuberculosis	13	..	..	..	1	2	9	1	..	3
Tuberculous Meningitis	7	5	1	..	..	..	1	..	..	1
Other Tuberculous Diseases	6	1	3	..	2	..	..	..	..	..
Cancer, Malignant Disease	19	..	..	..	..	..	4	9	6	4
Bronchitis	18	6	2	..	..	..	..	2	8	..
Broncho-Pneumonia	19	9	5	2	..	1	2	..	..	..
Pneumonia (all other forms)	9	..	1	..	..	1	1	3	3	1
Pleurisy	..	..	..	..	..	..	..	1	..	..
Other Diseases of Respiratory Organs	1	..	..	..	..	..	..	..	2	..
Diarrhœa and Enteritis	45	36	4	3	..	..	..	..	2	1
Alcoholism	2	..	..	..	..	..	2	..	..	1
Cirrhosis of Liver	2	..	..	..	..	..	1	1	..	..
Nephritis and Bright's Disease	13	..	..	..	1	..	1	5	6	..
Congenital Debility and Malformation including Premature Birth	38	38	..	..	..	..	..	..	..	..
Violent Deaths, excluding Suicides	8	..	2	1	1	4	..	..	..	10
Suicides	3	..	..	..	..	..	1	1	1	..
Other Defined Diseases	105	10	6	3	3	2	4	22	55	25
Diseases ill-defined or unknown	4	3	1	..	..	..	..	..	..	..
All causes	351	115	34	17	14	15	29	45	82	46

Means for Preventing Mortality in Child Birth and in Infancy.

Infantile Mortality.

The total number of deaths under one year of age was 115, or 182 per 1000 births registered during the year; nearly one-third of the total deaths.

This is a largely increased number compared with other years excepting 1902 and 1904,

Taking the last ten years for comparison, the figures are—

In 1902	there were	106	deaths	or 188	per 1000 births.
1903	,,	89	,,	149	,,
1904	,,	151	,,	266	,,
1905	,,	88	,,	152	,,
1906	,,	98	,,	148	,,
1907	,,	78	,,	127	,,
1908	,,	102	,,	151	,,
1909	,,	62	,,	93	,,
1910	,,	73	,,	115	,,
1911	,,	115	,,	182	,,

Arranged according to Wards the deaths were distributed as follows :—

North.	South.	East.	West.	Central.
30	31	29	9	16

The mortality moreover is only an index of the total amount of disease. For each death there are many cases of illness with its attendant suffering, prolonged weakness, and permanent damage.

The following table sets forth in detail the deaths of infants under the age of 12 months.

35 per cent. of illegitimate children born during the year died compared with 17 per cent. of legitimate children.

TABLE IV.

INFANTILE MORTALITY DURING THE YEAR 1911.—DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR OF AGE IN THE URBAN DISTRICT OF GOOLE.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total Deaths under 1 Year.
All Causes—Certified	22	7	5	0	34	16	31	23	11	115
Measles	...	...	..	..	..	..	..	..	1	1
Whooping Cough	...	...	..	...	..	1	1	4	...	6
Diarrhœa	...	1	1	..	2	2	20	7	4	35
Enteritis	..	..	..	..	..	..	1	...	...	1
Tuberculous Meningitis ..	..	..	..	..	..	..	1	3	1	5
Other Tuberculous Diseases ..	..	..	..	..	...	..	..	...	1	1
Congenital Malformations ..	1	...	...	...	1	...	..	...	1	2
Premature Birth ...	14	1	1	..	16	...	..	...	...	16
Atrophy, Debility, Marasmus..	4	1	3	..	8	7	4	1	..	20
Atelectasis	2	1	..	..	3	..	..	...	...	3
Syphilis	...	...	.	..	..	2	1	...	1	4
Meningitis (not Tuberculous) ...	...	..	..	...	.	..	..	...	1	1
Convulsions...	1	1	..	..	2	1	..	...	...	3
Bronchitis	..	1	..	..	1	1	1	3	..	6
Pneumonia (all forms)	...	..	..	...	..	1	2	5	1	9
Other Causes (Heart)	..	1	...	..	1	1	..	..	..	2
	22	7	5	0	34	16	31	23	11	115

Nett Births in the Year { legitimate 591 / illegitimate 40

Nett Deaths in the Year of { legitimate infants 101. / illegitimate infants 14.

This table was introduced by the Local Government Board in 1905, and from that year comparison may be made. This year's increase is mainly due to the deaths from diarrhœa so that "nature" is largely responsible. On the other hand "nurture" continues to contribute her quota. as witnessed by the 38 deaths from development causes, to which has to be added the deaths of 4 children from syphilis inherited from their parents.

The following letter was issued by the Local Government Board :—

Prevalence of Epidemic Diarrhœa Amongst Children.

LOCAL GOVERNMENT BOARD,
WHITEHALL, S.W.,
18th August, 1911.

SIR,

The Local Government Board have had under their consideration the excessive child mortality, especially from diarrhœa and enteritis, which is accompanying the very hot and dry summer of the present year. They realise that some excess of mortality over that occurring in cool and wet summers is inevitable : but they desire to impress upon the Council the importance of taking such special steps as are practicable with a view to minimising the excess.

The Board are aware that in a large number of sanitary districts special efforts are made each summer to remove the nuisances and other conditions which favour excessive mortality amongst children. They suggest the following lines along which it is most important that action should be taken, but they do not wish it to be understood that this advice covers the entire ground or that it does not need to be supplemented by action directed towards the speeial needs of individual districts.

Firstly, it is important that exact advice should be given as to the feeding and management of children, and more generally as to preventing the exposure of their food to contamination from decomposing organic matter. The distribution of clearly worded leaflets is useful in this connection : but even more important are personal visits and the offer of practical advice to the mothers of babies born within the last twelve months. Exact and simple instructions are most likely to be followed if given during a period of special danger. In districts and towns in which the Notification of Births Act has been adopted, the records obtained under that Act will give valuable information in selecting the homes to which visits are now most urgently required.

Secondly, the full value of the personal instructions indicated above cannot be realised unless vigorous efforts are made to prevent the accumulation in or in the vicinity of the house of decomposing animal and vegetable matter. It is not necessary to do more than mention the importance of efficient scavenging, of frequent and, if practicable, daily removal of house and stable refuse, of domestic cleanliness, and of keeping all food properly protected. The Council

may consider it advisable during the next few weeks to divert the sanitary inspectors from less urgent work, and to instruct them to make rapid visits with a view to securing efficient sanitation, especially in and about the houses of the working classes.

Thirdly, it is important that the Council should promptly ascertain in which parts of their district diarrhœa is especially prevalent, and should devote close attention to street and court scavenging and to the removal of stable and domestic refuse in these areas. Without waiting for the weekly death returns, efforts should be made to obtain information of cases of diarrhœa from health visitors and others who make domestic visits; and to impress upon parents the importance of immediate treatment of infantile diarrhœa. Apart from the medical notification of cases of epidemic diarrhœa in children, the visits of health visitors can be utilised for impressing upon parents the seriousness of diarrhœa amongst young children and the desirability of information being given to the Medical Officer of Health should a case of diarrhœa occur.

The Board will be glad if the Medical Officer of Health, in his annual report dealing with the current year, will set out the course of action adopted in the district to prevent diarrhœa and child mortality generally, in the special circumstances of the present year.

I am to request that you will at once hand the additional copies of this circular to the Medical Officer of Health.

It will be put on sale and further copies can be obtained from Messrs. Wyman and Sons, Ltd., Fetter Lane, E.C, either directly or through any bookseller.

I am, Sir,

Your obedient Servant,

H. C. MONRO,

Secretary.

The Town Clerk

or

The Clerk to the

District Council.

So far as we were able these instructions were acted upon excepting the "personal visits and the offer of practical advice to the mothers of babies born within the last twelve months." This duty would be more properly performed by a female health visitor.

Whilst the epidemic lasted the Sanitary Inspector and myself devoted our whole energies to this work according to our respective duties and responsibilities.

Prevalence of and Control ovcr Acute Infectious Diseases.

The Epidemic, Infectious or Zymotic Diseases.

The seven principal Epidemic or Zymotic Diseases in this country are:—Small-pox, Measles, Scarlet Fever or Scarlatina, Whooping Cough, Diphtheria, Enteric or Typhoid Fever, and Summer Diarrhœa.

The total number of deaths from these seven principal epidemic diseases in the year 1911 was 84, equivalent to a death-rate of 4·1 per 1000 living at all ages, compared with 1·2 in 1910.

These deaths were distributed as follows :—

Notifiable Diseases.	Cases	Deaths.
Enteric Fever ...	33	10
Scarlet Fever ...	20	1
Diphtheria and Croup	65	6
Erysipelas ...	22	0
Puerperal Fever ...	1	0
		17
Non-Notifiable :		
Measles		9
Whooping Cough		13
Diarrhœa		45
		84

The above notifications were distributed

21	in the	North	Ward.
31	,,	South	,,
50	,,	East	,,
25	,,	West	,,
14	,,	Central	,,

The Zymotic death rate in 1902 was 2·6

1903	,,	1·3
1904	,,	6·5
1905	,,	1·8
1906	,,	3·1
1907	,,	1·4
1908	,,	3·7
1909	,,	0·9
1910	,,	1·2

Again shewing the similarity between the years 1904 and 1911.

101 of the patients notified were removed to hospital.

The Zymotic death rate for England and Wales was 1·98 fo 136 smaller towns.

TABLE II.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1911 IN THE URBAN DISTRICT OF GOOLE.

Notifiable Diseases.	Number of Cases Notified.								Total Cases Notified in each Locality.					Total Cases removed to Hospital.
	At all Ages.	At Ages—Years.												
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and upwards	North Ward.	South Ward.	East Ward.	West Ward.	Central Ward.	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria including Membranous Cr'up	65	1	18	36	6	4	...	...	12	21	21	5	6	57
Erysipelas	22	1	1	1	3	7	7	2	5	3	5	8	1	...
Scarlet Fever	20	...	10	10	...	...	...	...	3	4	7	5	1	17
Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever	33	...	1	7	18	5	...	2	1	3	16	7	6	27
Relapsing Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Continued Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever	1	...	...	...	...	1	...	...	...	...	1	...	...	...
Phthsis: Under Tuberculosis Regulations, 1908	6	...	...	...	1	3	2	...	4	2	...	...	...	...
Phthsis: Under Tuberculosis Regulations, 1911	1	...	...	1	...	...	...	...	...	...	...	1	...	...
Phthsis: Others	7	...	...	...	1	3	3	...	...	1	3	3	...	...
Totals	155	2	30	55	29	23	12	4	25	34	53	29	14	101

Isolation Hospital—Goole Joint Hospital Board, Westfield Banks. Total available Beds, 26.
Number of Diseases that can be concurrently treated, 3

Diphtheria.

For the first year since my appointment diphtheria has given us very little trouble. Although 65 patients were notified as suffering from the disease, there was not at any time an outbreak of an epidemic character. There were six deaths, just over nine per cent. This is a higher death rate than formerly and is about the same rate as recorded by the Metropolitan Asylum Board's Hospitals. The deaths were mainly from "croup," which is the variety of diphtheria that attacks the larynx rather than the throat.

The epidemic of diphtheria began in September, 1901, and up to the year under review had been of a very infectious character. During 1911 the cases have been of an endemic nature.

During the year	1901	there were	225	cases notified.
,,	1902	,,	217	,,
,,	1903	,,	73	,,
,,	1904	,,	46	,,
,,	1905	,,	154	,,
,,	1906	,,	149	,,
,,	1907	,,	77	,,
,,	1908	,,	77	,,
,,	1909	,,	88	,,
,,	1910	,,	103	,,
,,	1911	,,	65	,,

A total of 1,274 cases with 91 deaths out of a total infant population in the town at school age of 4,059.

A few years ago I met Dr. Sörensen at Copenhagen and discussed with him the subject of diphtheria, and it is interesting to observe the conclusion he has recently come to as published in the "Hospitalstidende" on "return cases" of diphtheria at the Slegdam Hospital, Copenhagen.

During the last twelve years 7,037 cases of diphtheria have been treated there. There were 82 "return cases," that is to say there were 82 fresh cases of diphtheria among members of their families after the patients had returned home, or a proportion of 1·16 per cent. Of the 82 patients who were the apparent cause of infection, 81 had been examined bacteriologically and only eight showed the presence of the diphtheria bacillus in the throat. Of the 7,037 diphtheria patients during the 12 years, about 700 were carriers of the Löffler bacillus when they returned home, and yet these 700 patients only supplied eight "return cases," or 1·14 per cent., that is, almost the same proportion as given above, 1·16 per cent. It would seem therefore that the bacillus carriers are not more dangerous to their families than those ascertained by bacteriological examination to be exempt.

This is also the opinion of Dr. John Garrett, of Cheltenham.

With our experience of the disease one is on the look out for any new fact or opinion that will help towards eradicating the disease, and with this end in view we try to keep abreast of recent work on the subject.

The above conclusion serves to show that we are far from finality in this matter, and does not coincide with our own convictions, but coming from such an authority deserves consideration, as raising the question of what part our drainage system plays in the continuation of the disease. Bacteriologists tell us that the germ causing the disease only lives in the human throat and gives rise to the disease when it reaches a susceptible subject. How else can we account for explosive outbreaks of the disease? It is not difficult to believe further than the so-called "carrier" cases are the causal factor of further outbreaks of the disease when they come in contact with susceptible subjects.

The whole question of the epidemiology of disease is a difficult one, and progress can only be made by a true record of facts. The history of diphtheria alone exemplifies this. Formerly it was a disease of the country, now it is a disease of towns. Less than ten years ago a high authority published a brochure to show that school life had no influence on the spread of the disease; few authorities hold that opinion now. Within a still shorter period of time the Hoffman bacillus has been discarded as a causal factor in producing diphtheria, and it is only in the light of experience that these facts have been found out. Probably the comparatively new science of bacteriology has been answerable for some hasty conclusions.

We should be very loath to act upon Dr. Sôrensen's conclusions, and probably the mean is the safer course, and as it happens this has been the course adopted during the year under review. On the receipt of a notification all contacts were swabbed and any found positive advised to get an antiseptic gargle and avoid intimate contact with others. We recognised that the epidemic character of the disease was dying out and this was proved by events. But such measures would not be efficient in a susceptible population where the disease suddenly broke out in an epidemic manner. After 10 years our population must have become more or less immune, just as happened at Bristol for example. Another point to be noted is that a larger number of cases are now notified owing to the more general use of bacteriological diagnosis.

Just as I am writing this report an example is afforded of the manner in which the disease spreads The details belong to next year's report, but the salient points are that out of a total of 11 cases

(1) All were children in attendance at the same school and in the same or adjoining class-rooms.

(2) Three of the patients were a mother and her two children, and of the remaining members of the family one showed the presence of the disease germs in his throat.

(3) A cousin of these children living near also developed the disease and out of five members of this household one was positive bacteriologically.

(4) Six other contacts at school and living in different parts of the town subsequently developed the disease.

(5) When all the positive contacts were isolated no further cases arose.

(6) Following upon these cases we had two "return cases."

Facts such as these appear to confirm our previously expressed opinions.

Although the Council adopted the Local Government Board's order empowering them to provide for the poorer inhabitants of the dissrict a temporary supply of diphtheria antitoxin and medical assistance in connection with it, not a single application was made during the year.

Scarlet Fever.

This disease is another example of the variations in the epidemicity of disease. Scarlet fever in later years has become a much milder disease than formerly.

The experience of many towns is that they have extensive outbreaks of this disease, yet we experience a remarkable immunity. Although year by year there are a considerable number of notifications received, no outbreak of an extensive character has occurred yet. We always fear, however, that this may take place and of course we do not relax our precautionary measures.

During the year		1902	there were	30	cases.
,,	,,	1903	,,	86	,,
,,	,,	1904	,,	36	,,
,,	,,	1905	,,	50	,,
,,	,,	1906	,,	39	,,
,,	,,	1907	,,	80	,,
,,	,,	1908	,,	62	,,
,,	,,	1909	,,	29	,,
,,	,,	1910	,,	14	,,
,,	,,	1911	,,	20	,,

Measles.

Nine deaths were due to Measles.

In 1904 we had 45 deaths and in 1908, 29 deaths.

The administrative control of Measles is a very difficult problem.

In March I reported that Measles were prevalent all over the country in a virulent form.

At the suggestion of the President of the Local Government Board, a private conference of Medical Officers of Health was held and the following official statement was issued :—

> "A detailed discussion on means for preventing the spread of Measles was held, and the conference made a number of recommendations. Mr. John Burns, the President of the Local Government Board, was present during the greater part of the conference, and took an active part in the discussion. He subsequently summarised some of the main points which the discussion had elicited. These related to the possibilities of notification of the disease ; the possible need

for further hospital accommodation; the further use of educational means for preventing the spread of infection; the degree of utility of disinfection in Measles; the question of excluding children under five years of age from school attendance during epidemic periods or at other times; and the need for regulating private schools, including Sunday Schools."

Coming to our own case, on Monday, March 6th, the attendance officer sent me a list of cases of Measles amongst the children attending the Roman Catholic schools in Old Goole. I went over at once and found that 63 children were in attendance at the Infants' department out of 93 on the Register and that those affected were limited to the Infants' school. I visited the schools daily, and the position on the 13th inst. was that a fresh patient had developed the disease that morning and that only 46 children were in attendance, consequently I advised closure for five days.

In the Local Government Board memorandum on Rules of Action in regard to Measles, it is stated that "the attack rate is highest in the 3, 4, and 5 years of life, whilst the death rate is highest in the second year. After five the death rate is relatively small. These facts clearly indicate the importance of postponing an attack and of adopting special measures to ensure increased safety for children under five." Therefore I recommended that all children in the town under five be excluded from school till after Easter, and this was done.

No further trouble was experienced until September, when I received prompt intimation from the Attendance Officer of a first case at the Infants' department of the Old Goole Provided Schools. One or two cases occurred daily and I formed the opinion that the ninth day would be reached on the 25th or 26th inst., and consequently advised that these schools be closed for a period of seven days to begin on the 22nd. This action was taken but proved ineffective, so that we had to close the Infants' Department of the Old Goole Provided Schools and the Roman Catholic Schools from November 13th to December 4th, after which we experienced no further trouble

During the month of November last I was present in Hull at a conference on the Control of Measles, Dr. Louis Parkes presided and said, "they were all aware of the importance of measles, and agreed that it was one of the factors that had a great effect on the child population. The neglect of Measles was often followed by bronchial pneumonia, bronchitis and in many cases by tuberculosis. Therefore anything that could be done to prevent Measles would be of enormous value to the public health of the nation.

Measles was one of the oldest diseases in the world, and probably came out of the Ark; certainly it was known in the time of Moses. Through all these hundreds of centuries it had gone on very much the same. They had not yet found a way to prevent epidemics, and they did not know of any means of eradicating Measles in the way they hoped to eradicate small-pox, or even tuberculosis, He differed

from Dr. Coates with regard to the closing of Country Schools. In many country districts the children came from scattered hamlets and only met at school, and did not meet anywhere else. That did not apply to towns. There was the question of whether Measles was spread in the home or school. At one time he thought it was largely spread at school.

A Disease of the Home.

He had found, however, that Measles was a disease really of the home. It attacked children before they got to the school, and as far as one could ascertain, epidemics began in the home and not in the school. There were epidemics of Measles long before schools or elementary education. No doubt Measles might be spread by means of the schools, but schools were not the prime cause of the spread of epidemics. Notification was rather a moot question, and had been tried and given up. A speaker had said that with their modern methods of health visitors, especially lady health visitors, a better result from notification would be obtained. He thought that was quite possible, and that with lady health visitors and progressive municipalities they would be able to do something more than in the past. Apart from the question of notification, they had in London something which he did not think was possessed in any provincial town. For the last twelve years Measles had been put on the lists of dangerous infectious diseases which come within the penalty section of the Public Health Act. Thus, if a parent allowed a child suffering from Measles to play in the streets and come into contact with other children, he was liable to be prosecuted. This had been found extremely useful when an epidemic was threatening.

Use of Leaflets.

Leaflets were left at the homes where a child was suffering from Measles, a fact which they ascertained from the school teachers. The leaflets pointed out that the disease was dangerous and, after giving some directions for the care of the child, there was a warning that the child must not be allowed to come into contact with other children when recovering from the disease.

He thought that system could be well recommended to the authorities in the provinces, who would be able to obtain similar powers. He thought in dealing with Measles they were very largely dependent upon school teachers. If they were really enthusiastic about it they had the means of controlling and epidemic. If an epidemic was threatening in London leaflets were sent to the head teachers, acquainting them of the fact, and instructing them to exclude from school every child who came with a running nose, sore throat, cold, or cough. The addresses of such children were sent to the authorities. If this was properly carried out a great deal would be done to prevent the spread of the disease.

With regard to the dual notification:

This might work well amongst the artisan class, but he did not think it would in the case of slum dwellers and casual workers, who would not trouble to write calling the attention of the authorities.

Again, if people were to come to the health authority to give notification about all sorts of diseases they would begin to expect to have provided medical attention, medicine, and everything else they required to treat the illness.

Hospital Isolation.

In London they have adopted hospital isolation for Measles on a modified scale.

Wherever the Medical Officer of Health was satisfied that a particular case of Measles should be isolated the patient was removed to the hospital. This had already worked well, and he had seen numerous cases in his district removed to the hospital which had the effect of stopping the disease in that home. Cases in Poor-law infirmaries should be similarly treated to prevent the spread of the disease in the children's wards. He congratulated the company on the interesting and important discussion and thought something should be done. It seemed the problem of the present time was the care of the children. They must begin in the period of infancy and not about the second year of life. If they were to improve the health of the nation they must do it very largely by preventative measures taken in infancy. It depended upon the care and treatment of the infant whether it would be possible for their nation in the future to compete with other great nations of Europe and the World."

Whooping Cough.

Rather a larger number of deaths than usual were registered from whooping cough. Whooping cough was prevalent more or less during the whole year and accounted for 13 deaths.

VACCINATION RETURN FOR THE PERIOD JANUARY TO JUNE, 1911.

Births Registered ... 352.

Successfully vaccinated	165
Statutory declarations of conscientious objection	155
Dead—unvaccinated	24
Postponement by Medical Certificate ...	3
Removed to other districts	2
Removed to plares unknown	3
	352

Number of statutory declarations of conscientious objections received during the calendar year 1911 281

SUPPLEMENTAL RETURN FOR THE PERIOD JANUARY TO DECEMBER, 1910.

Births registered	...	660	
Successfully vaccinated	...	...	375
Statutory declaration of conscientious objections			222
Dead—unvaccinated	...	...	50
Postponement by Medical Certificate		...	4
Removed to other districts	...	...	2
Removed to places unknown	...	...	7
			660

Total number of certificates of successful primary vaccination at all ages received during the calendar year 1911 318

Epidemic Diarrhœa.

There were 45 deaths from diarrhœa during the year; 36 were under one year, 7 between one and five years of age, and two in old people.

As illustrating the progress of the epidemic, two deaths were registered in July, twenty in August, eleven in September, and one in October, these months coinciding with the period of fine weather during the past summer. The death rate in June was 10·6, in July 15·9, in August 27·7.

Looking back at past records one is able to determine which summers were fine, from the number of deaths caused by diarrhœa.

In 1904 there wers 57 deaths.
1906 ,, ,, 34 ,,

and these are exactly the summers which were fine and dry.

If we consider the exceptionally fine summer weather of 1911 to have eclipsed all others at any rate during the past ten years, we find at least that we have a better record to report than during 1904.

As I have already intimated we concentrated all our efforts on the lines recommended in the Local Government Board's letter. We continued to distribute hand bills containing advice as to precautions. Visits were made to every house where a death took place; particular attention was directed to the efficiency of the scavenging, and removal of house refuse and accumulations round dwellings.

Detailed enquiries were made in the cases of 39 deaths from infantile diarrhœa, a brief analysis of which shows that

(*a*) Only 7 infants were breast fed.
(*b*) Only 3 houses had water closets.
(*c*) Circumstances: in 25 cases the parents were poor, in 8 moderate, and in 6 good.
(*d*) In only 16 could the house and its surroundings be described as clean.
(*e*) In only one instance was there any further illness.

(f) All the houses were the homes of working people excepting three,
(g) Distribution—

13	deaths	occurred in the	North Ward.
10	,,	,,	East Ward.
10	,,	,,	South Ward.
3	,,	,,	Central Ward.
3	,,	,,	West Ward.

The births during the year in the several Wards were 220 in the North, 136 in the East, 155 in the South, 78 in the Central, and 59 in the West, so that the figures should read :—

(1) Over 7 per cent. of the children born in the East Ward died from infantile diarrhœa.
(2) Nearly 7 per cent. of the children born in the South Ward died from infantile diarrhœa.
(3) Over 6 per cent. of the children born in the North Ward died from infantile diarrhœa.
(4) Over 5 per cent. of the children born in the West Ward died from infantile diarrhœa.
(5) Nearly 4 per cent. of the children born in the Central Ward died from infantile diarrhœa.

The Report of the Medical Officer of the Local Government Board recently issued contains the following :—

" The exact share borne by flies in conveying the infection of epidemic diarrhœa cannot yet be stated. It would be a mistake, with our present knowledge, to assume that the problem of the prevention of this disease is limited to the destruction of flies. It is concerned also with the personal cleanliness of the house, the backyard, the court, and the street, from which infective material may obtain access to the infants' food, with or without the intermediation of flies. For practical purposes, however, the number of flies in the summer months may be regarded in towns as a valuable index, under present conditions, of the possibilities of contamination of food by pathogenic microbes or by decomposing organic matter; especially in districts in which privies and pail closets persist, and in which accumulations of house refuse or stable refuse are permitted."

Enteric Fever.

Concurrently with the epidemic of infantile diarrhœa there arose an epidemic of enteric fever.

The first intimation of the disease was the receipt of a notification on the 26th August of a case in Henry Street, in the West Ward. The patient was a girl aged 16 years, living with her parents, and died on the 28th inst.

This was followed by one on the 30th inst. from Mariners' Street, in the Central Ward, a barman aged 20 years, who had recently come to reside in Goole; and by another on the 2nd September, that of a pilot residing at Cross Edinburgh Street, in the East Ward.

These three points continued to be the centres of infection whilst the epidemic lasted, with one exception, that of a French sailor brought into port suffering from the disease.

In all 33 patients were notified with 10 deaths.

The greatest incidence was in the East Ward where 16 patients were notified compared with 7 in the West and 6 in the Central. The remaining cases, one in the North and three in the South, were isolated cases whose infection could be traced.

The disease was of an especially virulent type, thirty per cent. of the patients dying. Twenty-seven of the cases were removed to hospital.

As to the cause of the outbreak careful investigation showed firstly that it did not partake of the nature of a water borne infection, secondly that there was no common milk supply, thirdly that although complaints of smells were very frequent and persistent the cases were mainly in houses with box closets only three having water closets in addition, hence it was not a drain infection, fourthly there was no history of eating oysters or mussels, &c.

In a special report which I presented I gave it as my opinion that the outbreak was probably due to infection by flies, and in Dr. Newman's report previously referred to and which has just come to hand as I write, he state that "the evidence collected appears conclusively to incriminate house flies, of which *musca domestica* may regarded as the type, as carriers of typhoid fever, and the prevalence of flies, especially where privy middens persist, becomes an important index of the possibilities of spread of infection."

This coming from so high an authority has an important bearing for us when we remember that the number of water closets in the town is only 757, and the box closets 4195.

In addition to being of a virulent type of disease it was also of a very contagious character. In one house four people were stricken down one after the other; in another two people; in one street there were five cases, and two in the next, with a history of neighbours visiting, one of whom "laid out the body" and went home and cooked the food for her own family, one of whom subsequently developed the disease. One of our greatest difficulties was to prevent this neighbourly visiting, and to get those in attendance on the patients to carefully wash their hands after attending to the wants of the patients. This aspect of the case was very forcibly impressed upon us at the Sanatorium, where in spite of the most detailed instructions as to ventilation, wearing of rubber gloves, careful washing of face and hands, prompt removal of infected linen, &c., some of those in attendance developed the disease. One child probably developed the disease from kissing his uncle.

One patient came from Thorne, another from Hull, and a French sailor on board ship, all suffering from the disease, and all isolated cases which were promptly removed to hospital and from which no further case arose.

In addition to our usual precaution towards the prevention of the spread of the disease the three localities mentioned above were taken as centres, and round these all the box closets were emptied three times a week and daily sprinkled with a reliable disinfecting powder.

During the hot weather of the past summer we received oft repeated complaints of offensive smells and undoubtedly there was reason for them, but that they were the cause of disease is quite another matter. We investigated all these complaints very fully, and the cause was mainly from open manholes and from the night soil tip in Old Goole. We reported the open manholes to the Surveyor who had them closed up. Regarding the night soil tip in Old Goole, the smell from this was very offensive at times, and thus coincided with occasions on which a fire had taken place. This was reported and the nuisance abated. In this connexion I may add that burying the night soil has been carried out during the year and must have minimized this evil.

Seeing that the sewerage in Old Goole is sufficient and of good fall, there should be no difficulty in this part in proceeding with the closing up of manholes and erection of suitable and effective sewer ventilators; also the Percy Street drain might be more frequently flushed, especially in hot weather.

In our investigations we were surprised to find how seldom the people even in the presence of disease, attended to their sinks and gullies!

Another factor of importance to be added to these observations is, that the hot and dry weather causes evaporation of the water in the gullies, dusty roads, and rapid decomposition of refuse heaps.

Sanitary Defects Found.

Insufficient drainage, foul yard gullies, inefficient street gullies, street gullies without plugs, double pits where slops from infected houses were being emptied. Only one house received its water supply, from a well, the analysis of which showed that "it has received a very large amount of infiltration of oxidized nitrogenous impurities, and the surroundings of the source should be examined from time to time lest the filtering media should become over-taxed as in times of flood." All these defects were remedied.

In this connection I am tempted to refer to the Presidential address of Professor Bostock Hill to the Members of the Society of Medical Officers of Health at their Annual Meeting in October last, because everyone who is concerned about an offensive smell describes it to drainage, although the houses may have no drains at all. Apparently the popular idea is that sanitation is bound up with drains. He stated that the public still seem to cling tenaciously to the old idea that every thing hygienically wrong is due to sewage gas, and that in some way or other bad drainage lies at the bottom of all the sanitary evils that afflict humanity. The lesson that Professor Hill drew from this was that the education of the public in regard to

matters of health has not in reality kept pace with the true progress of modern sanitary science. Health officials know what a vast number of people there are who are ignorant of the most elementary laws of health or are absolutely indifferent to them.

A further reference I wish to make is to the Presidential address of Dr. Franklin Parsons, late Assistant Medical Officer, Local Government Board, and formerly Medical Officer of Health for this town, which was delivered to the Home Counties Branch in October last.

"The noxious privy system long had its ground in the northern towns, and entrenched behind a series of judicial decisions resisted the attacks of Sanitarians, but with aid of Section 39 of the Public Health Acts Amendment Act, 1907, the position can now be turned; and in many of such towns the erection of new privies is forbidden, and the conversion of existing ones into water closets is proceeding more or less rapidly. In most Southern towns water closets have long been in general use. Concurrently with these sanitary improvements, there has been a marked decline in the death rate, and in the mortality from enteric fever."

Enteric or typhoid fever is called the autumnal or fall fever because "it is much more prevalent in autumn and beginning of winter, especially after a dry and hot summer;" and our experience was similar to that of the county generally.

The County Medical Officer in his monthly report for September states that "The excessive prevalence of enteric fever is the chier feature of the month's returns. The total of 377 cases for September is the highest recorded since September. 1901."

In Goole in 1908 there was an epidemic of 65 cases, following upon an epidemic of summer diarrhoea similar to the one we have experienced in 1911.

Again, Dr. Kaye in his Annual Report for 1910, under the heading of enteric fever, says, "For that year the figures are almost the lowest ever recorded in the West Riding. To some extent we have to thank the weather conditions for this result, for, a cold, wet summer seems to be a safegard against those serious outbreaks where privy middens and unpaved back yards are common."

One last aspect of the disease remains to be mentioned, which is the question of "carrier" cases of the disease. This is well illustrated in one of our cases, that of a patient notified on September 22nd, who was removed to Hospital and discharged cured, but, who although apparently quiet well, and in spite of most careful treatment towards getting rid of the infection which remained in her urine, gives us the following report when submitted for bacteriological examination on the 2nd February, 1912.

"B. Typhous has been found in the urine in very large numbers."

This is the class of patient who, if unrecognized, is a source of danger to others, particularly in our own town where the urinals have no continuous flush of water; as her urine is infective and is capable of giving rise to the disease in others.

Puerperal Fever.

Only one notification of this disease was received and recovery ensued.

Cancer.

There were 19 deaths from Cancer

Compared with	6 in 1900	Compared with	14 in 1906
,,	7 ,, 1901	,,	13 ,, 1907
,,	12 ,, 1902	,,	9 ,, 1908
,,	25 ,, 1902	,,	14 ,, 1909
,,	6 ,, 1904	,,	21 ,, 1910
,,	14 ,, 1905		

At a recent Meeting of the Leeds Medico Chirurgical Society, Dr. Bashford, the Director of the Imperial Cancer Research Fund, was present and delivered an address in which he stated emphatically that Cancer was not a contagious disease.

Prevalence of and Control over Tuberculosis.

Thirteen deaths were caused by Consumption, and thirteen by other tuberculous diseases, making a total of 26 deaths from tubercle and giving a death rate from the diseases caused by tubercle of 1·2 per 1000 persons living compared with

2·2 in 1902	2·1 in 1906
2·2 ,, 1903	2 ,, 1907
2·4 ,, 1904	1·9 ,, 1908
1·6 ,, 1905	1·6 ,, 1909

1·7 in 1910

so that in ten years the mortality from tubercular diseases in Goole has been reduced by practically one half.

A total of 14 notifications of pulmonary tuberculosis was received during the year, seven under the Poor-law regulations and seven under the system of voluntary notification.

The deaths from Consumption alone amounted to 13, equal to ·6 per 1000 compared with

·5 in 1902	1 in 1906
1·3 ,, 1903	1 ,, 1907
·8 ,, 1904	·9 ,, 1908
·5 ,, 1905	·9 ,, 1909

1 in 1910

On receipt of a notification of pulmonary tuberculosis a visit is made to the home of the patient and enquiries made. Where the patient's social well-being is good we do not interpose, consulting rather with the doctor in attendance. In patients less favourably

circumstanced, and particularly when there is a family, we enter into the details of isolation, ventilation, and explain the instructions which are contained on the Card of Precautions.

In Poor-law cases, their condition is brought under the notice of the Guardians, who have afforded facilities for the use of Tuberculin. One such case is worth mentioning, that of a domestic servant aged 32 years who came home practically to die. She had extensive disease in both lungs, and now after less than six months treatment, she is able to do ordinary household duties, and very few moist sounds can be heard in her lungs. Judging from her present condition we expect that by the time the summer arrives she will again be able to earn her own livelihood.

When death occurs thorough disinfection of the room or rooms is made.

No attempt is made to ascertain the existence of early unrecognised cases in association with the notified cases of disease excepting a personal interview by myself of all the residents in the house.

No hospital or sanatorium accomodation is available for cases of consumption.

At the Union Infirmary, however, such accommodation exists, but only for their own cases.

In the early part of the year a resolution was passed by the Urban, and also by the Rural Councils of Goole for a joint conference on the subject, but no meeting took place, and consequently no action resulted.

Three carcases were examined for tuberculosis at the Slaughter-house. One was wholly destroyed and the other two partially.

PHTHISIS: SANATORIUM AND HOSPITAL ACCOMMODATION.

GOOLE URBAN DISTRICT.

Classes for which accommodation is provided.	By whom provided ?	Do the Sanitary Authority use—(1) their Isolation Hospital, or (2) their Small-pox Hospital for cases of Phthisis ?	Do the Sanitary Authority reserve Beds in any Phthisis Sanatorium : If so, how many, and in what Sanatorium ?	Do the Sanitary Authority provide portable open-air Shelters or Tents ?
(*a*) Early cases	None	No.	No.	No.
(*b*) Intermediate cases	None	No.	No.	No.
(*c*) Advanced cases	None	No.	No.	No.

Have the Council, or any Private Body, provided a Dispensary. If so, give particulars.—No.

7th February, 1912.

A M. ERSKINE, Medical Officer of Health.

BIRTHS, DEATHS, NOTIFICATIONS AND INFANTILE MORTALITY IN EACH WARD.

1911.	NORTH WARD.				SOUTH WARD.				EAST WARD.				WEST WARD.				CENTRAL WARD.			
	Births.	Deaths.	Notifications.	Infantile Mortality.	Births.	Deaths.	Notifications.	Infantile Mortality.	Births.	Deaths.	Notifications.	Infantile Mortality.	Births.	Deaths.	Notifications.	Infantile Mortality	Births.	Deaths.	Notifications.	Infantile Mortality.
January ...	16	7	1	0	12	10	7	5	12	7	3	2	2	4	4	2	7	2	1	0
February ...	22	6	0	2	14	7	4	1	13	6	2	1	6	2	0	1	4	3	2	0
March ...	19	8	3	2	20	6	2	1	12	1	3	0	9	4	1	1	12	6	0	2
April ...	16	3	1	0	13	6	0	1	8	5	8	4	4	2	0	0	2	6	0	1
May ...	18	5	2	3	15	11	2	4	18	6	1	1	5	0	0	0	7	2	1	1
June ...	18	2	1	0	12	7	2	2	10	6	1	1	3	1	3	0	9	2	0	1
July ...	8	9	0	2	12	6	5	1	8	5	3	2	4	4	7	0	2	3	0	1
August ...	13	7	0	5	13	13	3	6	13	18	2	10	7	5	4	2	4	4	2	3
September	14	9	4	9	7	9	1	2	4	9	13	2	3	4	5	1	4	4	4	1
October ...	13	5	5	2	11	8	1	1	15	7	3	0	6	0	3	0	1	4	0	0
November ...	24	7	3	3	10	9	2	4	12	5	6	3	6	4	2	0	11	5	3	3
December ...	21	5	1	2	17	10	4	3	11	5	3	1	4	5	1	2	10	4	1	3

METEOROLOGY.

RAINFALL in 1911 at GOOLE, in the County of York.

Rain Guage. } Diameter of Funnel at top, 5in.
Height of Top—above ground, 1ft.
,, above sea level, 18ft.

Councillor Grayburn has kindly furnished me with the following particulars :—

Rainfall.				Temperature.		
Month.	Total Depth	Greatest fall in 24 hours.	Date.	Max.°	Min.°	Mean.°
	Inches.	Depth.				
Jan.	1·28	·35	1st	52	29	37
Feb.	·96	·18	21st	55	21	40
March	·94	·22	13th	55	30	41
April	1·26	·27	25th	58	30	45
May	·62	·17	26th	66	41	53
June	4·09	2·40	24th	69	41	56
July	·34	·12	2nd	87	47	66
August	1·99	·71	27th	87	51	65
Sept.	2·45	·58	13th	78	39	57
Oct.	1·77	·36	22nd	58	32	49
Nov.	2·45	·61	19th	56	31	42
Dec.	3·48	·53	13th	56	31	41
Total	21·63					

TABLE B 1911.

FACTORIES, WORKSHOPS, WORKPLACES AND HOMEWORK.

1.—INSPECTIONS.

Premises.	No. of Inspections.	No. of Written Notices.	No. of Prosecutions.
Factories	30	3	0
Workshops	134	0	0
Workplaces	24	0	0
	188	3	0

2.—DEFECTS FOUND.

Particulars.	Number of Defects. Found.	Remedied.	Referred to H.M. Inspector.	Prosecution
Want of Cleanliness ..	2	2	0	0
Overcrowding	1	1	0	0
Sanitary accommodation—				
Unsuitable or defective	1	1	0	0
Illegal occupation of underground bakehouses (s. 101)	1	1	1	0
Total ..	5	5	1	0

3.—HOME WORK.

Nature of Work.	Lists received from Employers twice in the year. Lists.	Contractors.	Workmen.
Wearing Apparel—Making, &c ..	2	1	1
Total ..	2	1	1

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year.

	Number.		Number.
Blacksmiths	5	Watchmakers	3
Joiners	11	Tinsmiths	6
Bakehouses	15	Dressmakers	18
Shoemakers	15	Millinery	11
Sailmakers	3	Others	4
Plumbers	6		

Total number of Workshops on Register ... 97.

5.—OTHERS MATTERS.

Class.	Number.
Matters notified to H.M. Inspector of Factories—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133)	5
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5)—	
Notified by H.M. Inspector	2
Reports (of action taken) sent to H.M. Inspector ..	2
Other	2
Underground Bakehouses (s. 101) :—	
Certificates granted during the year	0
In use at the end of the year	1

TABLE C. 1911.

GOOLE URBAN SANITARY DISTRICT.

WATER SUPPLY—

In what part is there a piped supply laid on .. Over the whole town.
Any development during 1911 .. .. No.
Any insufficiency, and where ? .. .. .. No.
Any curtailment during drought .. .. No.
Any unsatisfactory quality, and where ?... .. No.
Any unchecked plumbo solvent action .. .. No.

DRAINAGE AND SEWERAGE—

What parts have sewers and outfall works .. No outfall works.
Any developments during 1911 .. .. Sanction of the L.G.B. to New Sewage Scheme
Developements still needed .. .. .. Extensions.
Any inadequacy of Sewage Disposal Works or complaints as to smells .. } No Sewage Disposal Works
No. of sink-wastes disconnected during 1911 4. Trapped .. 4.
Proportion of sink-wastes still needing disconnection .. .. } Not known. Untrapped .. Unknown

CLOSET ACCOMMODATION—

No. of Privies with open middens .. 4. No. of Box Closets .. 4013.
No of Privies with covered middens 161. No. of Water Closets.. 753.
Waste-water Closets 7.
No. of Closets re-constructed during 1911—(*a*) as w.c.'s..27. (*b*) other...42.
No. of additional Closets newly constructed for old property in 1911 .. .. } (*a*) w.c.'s ... 0. (*b*) other... 6
No. of Closets construeted in 1911 for new houses (*a*) w.c.'s 32. (*b*) other 33.

SCAVENGING—In what parts do the Council undertake public seavenging ..
(*a*) By Sanitary Staff ... None (*b*) By Contractors...For the whole area.
Is there any inadequancy, and where ? .. .. No.

NUISANCE INSPECTION—

Total No. of Inspections made in 1911 .. .. 2343.
Informal Notices served .. 244. Complied with ... ... 232.
Statutory Notices served ... 15. Complied with ... ... 12.
Total No. of Nuisances in hand at close of 1910...6. at close of 1911.. 12.
Total No of Nuisances reported during 1911..244. abated during 1911..250.
Total No of Summonses or other legal proceedings ... . 1.

Regulated Buildings, Trades, &c.	No in District.	No. on Register.	No. of Inspections.	General Condition.	Legal Proceedings
Common Lodging Houses ...	4	4	75	Fair.	0
Canal Boats	676	879	126	Good.	0
Offensive Trades	2	2	46	Satisfactory	0
(Please specify kind)	Tillage Works and Tripe Boiler.				

Have the Council declared any other proeesses to be offensive trades, *e.g.* Fish-frying, Maggot-breeding, etc. ... ... No.

SCHOOLS—

No of Visits to Schools ... ... 74.
Action taken .. .. Closure and Exelusion under 5 years.

MILK SUPPLY—

No. of samples taken by Officers of S A. for analysis under F. & D. Acts..5
No. adulterated 0
No. of samples taken by Officers of S.A. for bacteriological examination...0
What arrangement for Veterinary Inspection of dairy cows ... None
Any instance of disease attributed to milk in 1911 ... . No
No. of Cowkeepers in district .. .. 2. No Registered .. 2
No. of Milk Sellers .. .. 30. No. Registered .. 30
Total No. of Cowsheds ... 2 No. of Inspections in 1911 ... 40
General Condition .. .. .. Good.
Approx. No. of Milch Cows in District 18
Any insufficiency in Milk Supply ... . No
Legal proceedings under D.C.M. Orders .. .. None
Any Inspection or other action by Districts to which Milk is sent . No

OTHER FOODS—

No. of samples (other than Milk) taken by Officer of S.A. for examination under the Food and Drugs Acts .. .. None
No. adulterated 0
No. of seizures of unsound food .. 0 Kind and quantity .. 0
No. of Prosecutions 0
No. of Slaughter houses .. 2 No. Registered 2
Kind and Condition .. One Public and One Private. Fair only
No. of Prosecutions—
(*a*) Food and Drugs—0 (*b*) Unsound Food—0 (*c*) *re* Slaughter Houses—0

HOUSING—

Is there any scarcity of houses, and where? .. .. Practically none
Any overcrowding of persons in houses..Yes No. of cases dealt with..7
Any special activity in house building, and where? .. Yes, in East Ward
No. of new houses built in 1911 ... 65 General character ..Villas
Are there any working class dwellings erected by the S.A. .. .. No
Any Town Planning Scheme contemplated .. .. No
Who has been designated as the Inspecting Officer under Article II. of the Housing Regulations, 1910? M O.H.
No. of houses inspected during 1911,—
(*a*) Statutory (house to house) .. 197 } Total .. 337
(*b*) Other house-inspections .. 140 }
No of Notices served as a result of House inspections 40
Legal proceedings 1
Are the records regularly submitted to the S.A. at each ordinary meeting Yes
No. of houses represented as unfit for habitation 40
No. dealt with by Closing Order .. 40 Any compulsory demolition Yes
Are there still any occupied houses unfit for habitation, and where? .. .. All dealt with as reported upon
Any cellar dwellings .. .. Yes

FACTORIES AND WORKSHOPS—

Any Smoke nuisance, and where? ... ... North Ward
No. of Smoke observations taken...2 Legal Notices...0 Summonses ..0

ADOPTIVE ACTS—

Adoptive Act.	Parts or Sections in force.	Date of Adoption.
Public Health Acts Amendment Act, 1890	Whole ...	17/2/1892
Public Health Acts Amendment Act, 1907	Part I to V. ...	19/2/1909
Infectious Disease Prevention Act, 1890	Whole ..	24/6/1891
Notification of Births Act, 1907 ..	No ...	
Private Street Works Act	Whole ..	21/4/1897
Are any of the above needed, and where?		See Text

BYELAWS AND REGULATIONS—

Byelaws	Date.
Private Scavenging	None
Prevention of Nuisances	28th June, 1906
Common Lodging Houses	28th June, 1906
Houses let in Lodgings	None
Offensive Trades	28th June, 1906
Mortuaries	None
New Streets and Buildings (P.H. Act, 1875)	13th April, 1910
New Streets and Buildings (P.H. Amendment Act, 1890)	13th April, 1910
Slaughter Houses	28th June, 1906
Tents and Vans	None
Cemeteries	29th April, 1895
Markets and Fairs	11th December, 1903
Baths and Washhouses	5th September, 1906
Pleasure Grounds	None
Fried Fish Shops	None
Regulations under Dairies, Cowsheds & Milkshops Order	28th June, 1906
Does the M.O.H. possess a printed copy of each of the Byelaws which are operative?	Yes
Are any other Byelaws needed?	No

INFECTIOUS AND OTHER DISEASES—

What diseases have been specially prevalent in 1911?	Diarrhœa, Enteric, Measles, Pertussis
What special action to combat same?	Concentration of the work of the Officials.
Is Hospital accommodation adequate and sufficient?	Yes
What arrangement for the supply of antitoxin...	By applying to the M.O.H.
Any diseases specially added to notifiable List	No
Any influences threatening the health of the District	No

SPECIAL REPORTS AND INVESTIGATIONS—

Summer Diarrhœa, Measles, Enteric Fever

TUBERCULOSIS—

Any Sanitary Inspection of Patient's Houses	Yes
Any disinfection	Yes
Any distribution of advice	Yes
Other benefits	None
Any action *re* spitting	No
Any disinfection of Public Rooms, Vehicles, etc.	No

INFANT MORTALITY—

What organised effort to control it?

Special effort through ordinary channels

Is Health Visitor appointed by S.A.? No By other body No

Causes of any Excessive Infant Mortality in 1911 .. .. Diarrhœa

VITAL STATISTICS—

BIRTHS during 1911—Males	313	Females	318	Total 631
No. illegitimate included in above				40
No. of Still Births (not included)				39

DEATHS during 1911—(1) Gross Deaths, *i.e.*,
Total actually registered in the District without any correction .. 345

(2) Nett Deaths on which the rates are calculated—

Males,	191	Females	160	351
No. of uncertified deaths (included above)				0

MISCELLANEOUS—

Mean Temperature for 1911 ..	49o	Rainfall	21·63
What Mortuary accommodation—(*a*) for accidents			Yes
(*b*) for infectious cases			No
No. of Burial Grounds	2	Any need for extension	No
Are there any Maggot breeding establishments in District? ..			No
Any nuisance therefrom or action in relation thereto			No

SANITARY STAFF—

What is the present Annual Salary of the M.O.H.	£80
Does the above include any recent increase in respect of added work?	No
Amount of such Increase	None

Name of Sanitary Inspector	Annual Salary as Inspector	Other appointments held	Salary for such other appointments
W. H. Ellis ..	£140 ..	Carriages, Petroleum, Dairies. ...	None.
Any Assistants			Youth
Is Staff sufficient?			No

BEASTS, SHEEP, PIGS AND CALVES SLAUGHTERED AT THE PUBLIC SLAUGHTER-HOUSE.

1911.

	Beasts.	Sheep.	Pigs.	Calves.
January.....	99	136	147	—
February ...	105	147	152	—
March	101	147	148	1
April	130	200	136	23
May	105	221	72	2
June	102	261	62	1
July	131	324	62	1
August	104	267	58	—
September...	133	289	104	—
October	109	159	124	5
November ...	102	155	204	—
December ...	123	158	270	—
	1344	2464	1539	33

SUMMARY.

	1910.	1911.	Increase.	Decrease.
Beasts ...	1413	1344	—	69
Sheep ...	2432	2464	32	—
Pigs ...	1432	1538	107	—
Calves ...	37	33	—	4

PORT OF GOOLE.

Table showing Number and Tonnage of Vessels which have arrived during the Years 1902 to 1911.

Years.	Number of Vessels.		Total No. of Vessels, Foreign and Coastwise.	Tonnage.		Total Tonnage. Foreign and Coastwise.
	Foreign.	Coastwise.		Foreign.	Coastwise.	
1902	1377	1098	2475	531943	328178	860120
1903	1336	1103	2439	537018	329896	864918
1904	1362	1232	2594	558864	384209	940073
1905	1548	1511	3059	613697	435410	1048207
1906	1892	1737	3629	758820	520275	1279085
1907	2087	1723	3820	874447	515385	1389832
1908	1896	1722	3618	783228	509959	1293187
1909	1979	1937	3916	815177	567546	1382723
1910	1945	2055	4000	804792	633882	1438674
1911	1857	1906	3763	777287	614725	1392012